

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 449122017000	
	In re Application of Stefan SCHAFFLER		
	Application Number 09/423,066		Filed November 1, 1999
	For METHOD AND ARRANGEMENT FOR DETERMINING ATLEAST ONE DIGITAL SIGNAL FROM AN ELECTRICAL SIGNAL		
	Art Unit 2666	Examiner F. Duong	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | | | |
|-------------------------------------|--|----|--------|
| <input type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$ | |
| <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ | |
| <input checked="" type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) (\$950.00 - \$420.00 (2mnth eot paid 7/6/2004)) | \$ | 530.00 |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ | |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ | |
- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____ 03-1952 _____.

I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

- I am the ☐ applicant/inventor.
☐ assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☐ attorney or agent of record. Registration Number _____
☒ attorney or agent under 37 CFR 1.34(a).
 Registration number if acting under 37 CFR 1.34(a) 45,640

August 6, 2004
Date

(703) 760-7769
Telephone Number

4(a). _____
CFR 1.34(a) _____ 45,640 _____

Signature

Jonathan Bockman
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ Total of 1 forms are submitted.